

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Psychology PAC of the American Psychological Association Practice Organization

ADDRESS (number and street) PO Box 65353 Washington DC 20035 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE C C00522094 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 08 / 01 / 2017 through 08 / 31 / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Mason, David, , , Type or Print Name of Treasurer

Signature of Treasurer Mason, David, , , [Electronically Filed] Date 09 / 19 / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Psychology PAC of the American Psychological Association Practice Organization

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|--|--|
| 6. (a) Cash on Hand January 1, <input type="text" value="2017"/> | <input type="text" value="161261.99"/> | <input type="text" value="161261.99"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="177671.08"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="11072.33"/> | <input type="text" value="81731.88"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="188743.41"/> | <input type="text" value="242993.87"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="606.37"/> | <input type="text" value="54856.83"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="188137.04"/> | <input type="text" value="188137.04"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Psychology PAC of the American Psychological Association Practice Organization

Report Covering the Period: From: M M / D D / Y Y Y Y 08 / 01 / 2017 To: M M / D D / Y Y Y Y 08 / 31 / 2017

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 4845.00 | 36820.00 |
| (ii) Unitemized | 5275.00 | 43485.50 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 10120.00 | 80305.50 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 10120.00 | 80305.50 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 952.33 | 1426.38 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶ | 11072.33 | 81731.88 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 11072.33 | 81731.88 |

DETAILED SUMMARY PAGE
of Disbursements

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 356.37 | 3073.25 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 356.37 | 3073.25 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 50883.58 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 250.00 | 900.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 250.00 | 900.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 0.00 | 0.00 |
| 30. Federal Election Activity (52 U.S.C. § 30101(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 606.37 | 54856.83 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 606.37 | 54856.83 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| III. Net Contributions/ Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 10120.00 | 80305.50 |
| 34. Total Contribution Refunds (from Line 28(d)) | 250.00 | 900.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 9870.00 | 79405.50 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 356.37 | 3073.25 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 952.33 | 1426.38 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | - 595.96 | 1646.87 |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 6 OF 16 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Psychology PAC of the American Psychological Association Practice Organization

A. Kelly, Heather, O'Beirne, Dr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4103 Orleans Pl

| | | |
|--------------------|-------------|------------------------|
| City Alexandria | State VA | Zip Code 22304-1618 |
|--------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|--|
| Name of Employer (for Individual) American Psychological Association | Occupation (for Individual) Psychologist/Lobbyist |
|---|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 03 | | 2017 |

Transaction ID : A9AF6F68185BD4247BB4

Amount of Each Receipt this Period
150.00

Memo Item

B. Coddington, Theresa, M, Dr, PhD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10981 Gillette St

| | | |
|-----------------------|-------------|------------------------|
| City Overland Park | State KS | Zip Code 66210-1160 |
|-----------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|---|
| Name of Employer (for Individual) Self | Occupation (for Individual) Psychologist |
|---|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 03 | | 2017 |

Transaction ID : A7DFFC2B9CBD242908C1

Amount of Each Receipt this Period
150.00

Memo Item

C. Brown, Kathleen, Sitley, , PhD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2743 1st St
Apt 1105

| | | |
|--------------------|-------------|------------------------|
| City Fort Myers | State FL | Zip Code 33916-1869 |
|--------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|---|
| Name of Employer (for Individual) Self | Occupation (for Individual) Psychologist |
|---|---|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 03 | | 2017 |

Transaction ID : ABC055F09D140444A9A8

Amount of Each Receipt this Period
150.00

Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 450.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 OF 16 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Psychology PAC of the American Psychological Association Practice Organization

A. Buckman, Lindsey, Renee, , PsyD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 818 E Osborn Rd
 Ste 107
 City Phoenix State AZ Zip Code 85014-5218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 03 / 2017
Transaction ID : AD9155AF5ADB94F189E2
 Amount of Each Receipt this Period 150.00
 Memo Item

B. Walter, Douglas, , , JD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2574 Huey Ave
 City Drexel Hill State PA Zip Code 19026-1318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Psychological Association Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 03 / 2017
Transaction ID : ADD027A0CAFC145C799F
 Amount of Each Receipt this Period 150.00
 Memo Item

C. Linder-Crow, Jo, , Dr., PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1231 I St
 Ste 204
 City Sacramento State CA Zip Code 95814-2933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) California Psychological Association Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 04 / 2017
Transaction ID : ADA8B556C1AA0459BBD5
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 OF 16 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
Psychology PAC of the American Psychological Association Practice Organization

A. Coons, Helen, L, Dr., PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4325 Clay Commons Ct
 City Boulder State CO Zip Code 80303-2672
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Women's Mental Health Associates Occupation (for Individual) Clinical Health Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 04 / 2017
Transaction ID : AA2F1A2146B52487EA59
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Palmer, Laura, K, Dr., PhD.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37 Kings Rd Ste 102
 City Madison State NJ Zip Code 07940-2500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Laura Palmer PhD ABPP Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 05 / 2017
Transaction ID : A749CCBF707D7463EB17
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Worrell, Frank, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4511 Tolman Hall MC1670 School Psy
 City Berkeley State CA Zip Code 94720-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UC Berkeley Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 08 / 05 / 2017
Transaction ID : AE936129670194F4CB79
 Amount of Each Receipt this Period 150.00
 Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 500.00 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 9 OF 16 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Psychology PAC of the American Psychological Association Practice Organization

A. Hayes, David, , Dr., PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1105 Schrock Rd
 Ste 207
 City Columbus State OH Zip Code 43229-1174
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Clinical Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 06 / 2017
Transaction ID : A0FB9675D01F5427BA29
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Armstrong, David, , Dr, PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 274 Fountain River Dr
 City Memphis State TN Zip Code 38120-1855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 07 / 2017
Transaction ID : AA50E471832FE47CC908
 Amount of Each Receipt this Period 320.00
 Memo Item

C. Johnson, Jennifer, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 1st St NE
 City Washington State DC Zip Code 20002-4241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APA Occupation (for Individual) Director, Psychology PAC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 07 / 2017
Transaction ID : A9CC881C2D1A1439282B
 Amount of Each Receipt this Period 125.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 495.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 OF 16 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)
Psychology PAC of the American Psychological Association Practice Organization

A. Smith, Peter, M, Dr., PsyD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2726 Quarry Heights Way

| | | |
|-------------------|-------------|------------------------|
| City Baltimore | State MD | Zip Code 21209-1069 |
|-------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|---|
| Name of Employer (for Individual) State of Maryland | Occupation (for Individual) Psychologist |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 08 / 10 / 2017
Transaction ID : A55F95A979F504C72A9D

Amount of Each Receipt this Period
125.00

Memo Item

B. Henderson, Robin, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3785 Fairhaven Dr

| | | |
|-------------------|-------------|------------------------|
| City West Linn | State OR | Zip Code 97068-3771 |
|-------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|---|
| Name of Employer (for Individual) Oregon Psychological Association | Occupation (for Individual) Psychologist |
|---|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 08 / 10 / 2017
Transaction ID : AFE66797C41324287858

Amount of Each Receipt this Period
50.00

Memo Item

C. Sammons, Morgan, T, , PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address National Register Of Health Servic
1200 New York Ave Nw Ste 800

| | | |
|--------------------|-------------|------------------------|
| City Washington | State DC | Zip Code 20005-6142 |
|--------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|---|
| Name of Employer (for Individual) Self Employed | Occupation (for Individual) Psychologist |
|--|---|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 08 / 10 / 2017
Transaction ID : A2321C8CD18884180A7E

Amount of Each Receipt this Period
100.00

Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 275.00 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 11 OF 16 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Psychology PAC of the American Psychological Association Practice Organization

A. Nguyen, Annie, Ha, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 640

| | | |
|----------------|-------------|------------------------|
| City Kailua | State HI | Zip Code 96734-0640 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|---|
| Name of Employer (for Individual) Self-employed | Occupation (for Individual) Psychologist |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08 | / | 10 | / | 2017 |

Transaction ID : A66B5F70A6DE240C894B

Amount of Each Receipt this Period
100.00

Memo Item

B. Newman, Gilbert, H, Dr., PhD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2728 Durant Ave

| | | |
|------------------|-------------|------------------------|
| City Berkeley | State CA | Zip Code 94704-1725 |
|------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|---|
| Name of Employer (for Individual) Wright Institute | Occupation (for Individual) Psychologist |
|---|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08 | / | 11 | / | 2017 |

Transaction ID : A0D5DA231691F4EF0A1C

Amount of Each Receipt this Period
250.00

Memo Item

C. Fox, Ronald, E, , PhD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 303 S Carolina Ave SE

| | | |
|--------------------|-------------|------------------------|
| City Washington | State DC | Zip Code 20003-4213 |
|--------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) Retired | Occupation (for Individual) Retired |
|--|--|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1600.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08 | / | 14 | / | 2017 |

Transaction ID : ABAEEA8CFCE62471CA4E

Amount of Each Receipt this Period
1500.00

Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1850.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 12 OF 16 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Psychology PAC of the American Psychological Association Practice Organization

A. Puente, Antonio, E, Dr., PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Dept of Psychol
 Univ of NC
 City Wilmington State NC Zip Code 28403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) University of NC Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 08 / 14 / 2017
Transaction ID : A9B3221BAB6E4435FBEB
 Amount of Each Receipt this Period 375.00
 Memo Item

B. Nordal, Katherine, C, Dr., PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25015 Duntery Ct
 City Gaithersburg State MD Zip Code 20882-3605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APA Occupation (for Individual) Executive Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 14 / 2017
Transaction ID : A99C091DC4CD844C7B8B
 Amount of Each Receipt this Period 500.00
 Memo Item

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 875.00 |
| TOTAL This Period (last page this line number only)..... | 4845.00 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

| | |
|--|---|
| FOR LINE NUMBER: (check only one) | PAGE 13 OF 16 |
| <input type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |
| <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 15 | <input type="checkbox"/> 12 <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Psychology PAC of the American Psychological Association Practice Organization

A. Marriott Marquis Washington DC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 901 Massachusetts Ave NW

| | | |
|--------------------|-------------|------------------------|
| City Washington | State DC | Zip Code 20001-4307 |
|--------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
952.33

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08 | | 30 | | 2017 |

Transaction ID : A41DADDA307194669954

Amount of Each Receipt this Period
952.33

Memo Item
Offset for PAC Event

B.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|-----|---|-----|---|---------|

Amount of Each Receipt this Period

Memo Item

C.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|-----|---|-----|---|---------|

Amount of Each Receipt this Period

Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 952.33 |
| TOTAL This Period (last page this line number only)..... | 952.33 |

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Psychology PAC of the American Psychological Association Practice Organization

Full Name (Last, First, Middle Initial)

A. Aristotle International, Inc.

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 01 | | 2017 |

Mailing Address 205 Pennsylvania Ave SE

FEC Identification Number

C []

Transaction ID : B029DB4A02
Amount of Each Disbursement this Period

[] 11.25

Memo Item

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
Credit Card Processing Fee

[]
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

B. Aristotle International, Inc.

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 04 | | 2017 |

Mailing Address 205 Pennsylvania Ave SE

FEC Identification Number

C []

Transaction ID : B793D6C0E5!
Amount of Each Disbursement this Period

[] 9.50

Memo Item

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
Credit Card Processing Fee

[]
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

C. Aristotle International, Inc.

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 08 | | 2017 |

Mailing Address 205 Pennsylvania Ave SE

FEC Identification Number

C []

Transaction ID : BCA2160FDc
Amount of Each Disbursement this Period

[] 141.12

Memo Item

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
Credit Card Processing Fee

[]
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[] 161.87

[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Psychology PAC of the American Psychological Association Practice Organization

Full Name (Last, First, Middle Initial)

A. Aristotle International, Inc.

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 11 | | 2017 |

Mailing Address 205 Pennsylvania Ave SE

FEC Identification Number

| |
|---|
| C |
|---|

Transaction ID : BF81877B23/
Amount of Each Disbursement this Period

| |
|--------|
| 161.75 |
|--------|

Memo Item

City
Washington

State
DC

Zip Code
20003-1164

Purpose of Disbursement
Credit Card Processing Fee

| |
|--|
| |
|--|

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Aristotle International, Inc.

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2017 |

Mailing Address 205 Pennsylvania Ave SE

FEC Identification Number

| |
|---|
| C |
|---|

Transaction ID : BCC73CB7AC
Amount of Each Disbursement this Period

| |
|-------|
| 31.75 |
|-------|

Memo Item

City
Washington

State
DC

Zip Code
20003-1164

Purpose of Disbursement
Credit Card Processing Fee

| |
|--|
| |
|--|

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Aristotle International, Inc.

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 18 | | 2017 |

Mailing Address 205 Pennsylvania Ave SE

FEC Identification Number

| |
|---|
| C |
|---|

Transaction ID : B15E465D43
Amount of Each Disbursement this Period

| |
|------|
| 1.00 |
|------|

Memo Item

City
Washington

State
DC

Zip Code
20003-1164

Purpose of Disbursement
Credit Card Processing Fee

| |
|--|
| |
|--|

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 194.50 |
|--------|

| |
|--------|
| 356.37 |
|--------|

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input checked="" type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Psychology PAC of the American Psychological Association Practice Organization

Full Name (Last, First, Middle Initial)

A. Galt, Cynthia, P, , PhD

Mailing Address PO Box 703772

City
Dallas

State
TX

Zip Code
75370-3772

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B302562C33!
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Lightfoot, Sharon, L, , PhD

Mailing Address 484 Lake Ave

City
Saint Louis

State
MO

Zip Code
63108-1148

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B9C1A8EF33!
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶